CHAPTER 29. STATE BOARD OF PODIATRY

GENERAL PROVISIONS

Sec.
29.1. Definitions.
29.2. Application.
29.3. Applicability of general rules.

LICENSES

29.11. National Board examination.
29.13. Fees.
29.15. [Reserved].

STANDARDS OF ETHICAL PRACTICE

29.22. Gifts.
29.23. Confidentiality.
29.24. Professional courtesy.
29.25. Obligations.
29.27. Permitted business practices.

ADVERTISING

29.31. Advertising.
29.31a. [Reserved].
29.32. [Reserved].
29.33. [Reserved].
29.34. [Reserved].
29.35. [Reserved].
29.36. [Reserved].

ADMINISTRATION AND PRESCRIPTION OF DRUGS

29.41. Therapeutic drugs.

LICENSURE APPLICATIONS

29.51. Applicants.
29.52. Requirements for applicants.
29.53. Original license.
29.54. Penalty.
29.55. Volunteer license.

CONTINUING EDUCATION

29.60. Definitions.
29.61. Requirements for biennial renewal and eligibility to conduct educational conferences.
29.62. Length of time of educational conferences.
29.63. Curriculum of educational conferences.
29.63a. [Reserved].
29.64. Application for approval of educational conferences.
29.65. Compilation of official attendance list.
29.66. Instructors at education conferences.
29.67. Approval or disapproval of educational conferences.
29.68. Continuing education exemptions.
29.69. Continuing education requirement for biennial renewal of inactive and lapsed licenses.
29.69a. Disciplinary action authorized.

RECIPROCAL LICENSURE

29.71. Application.
29.72. Finding by the Board: equivalent standards for licensure.
29.73. Residency required.
29.74. Falsification of application; failure to become a resident.

PERFORMANCE OF RADIOLOGICAL PROCEDURES
BY AUXILIARY PERSONNEL

29.81. Definitions.
29.82. Auxiliary personnel performing radiologic procedures.
29.83. Examinations.
29.84. Locations and dates of examinations.

CHILD ABUSE REPORTING REQUIREMENTS

29.91. Definitions relating to child abuse reporting requirements.
29.92. Suspected child abuse—mandated reporting requirements.
29.93. Photographs, medical tests and X-rays of child subject to report.
29.94. Suspected death as a result of child abuse—mandated reporting requirement.
29.95. Immunity from liability.
29.96. Confidentiality—waived.
29.97. Noncompliance.

Authority

The provisions of this Chapter 29 issued under the Podiatry Practice Act (63 P. S. §§ 42.1—42.21), unless otherwise noted.

Source

The provisions of this Chapter 29 adopted December 1, 1965, unless otherwise noted.

Cross References

GENERAL PROVISIONS

§ 29.1. Definitions.
The following words and terms, when used in this chapter, have the following meanings, unless the context clearly indicates otherwise:

Act—The Podiatry Act of 1956 (63 P. S. §§ 42.1—42.21a).
Board—The State Board of Podiatry Examiners of the Commonwealth.
National Board—The examination given by the National Board of Podiatric Medical Examiners.

Authority
The provisions of this § 29.1 amended under section 14(a) of the Podiatry Practice Act (63 P. S. § 42.14(a)).

Source

§ 29.2. Application.
The Board has exclusive jurisdiction over persons licensed in chiropody or podiatry in this Commonwealth.

Source
The provisions of this § 29.2 adopted December 1, 1965.

§ 29.3. Applicability of general rules.
Under 1 Pa. Code § 31.1 (relating to scope of part), 1 Pa. Code Part II (relating to general rules of administrative practice and procedure) is applicable to the activities of and proceedings before the Board.

Source
The provisions of this § 29.3 adopted February 13, 1976, effective February 14, 1976, 6 Pa.B. 325.

LICENSES

§ 29.11. National Board examination.
The Board may grant a license to an applicant who holds a National Board Certificate, who has met the other requirements of the act and has satisfactorily passed a clinical examination on the subject of podiatry.

Source

§ 29.12. Adoption of National Board examination.
(a) The Board adopts as part of its examination the National Board. Candidates who have passed this examination under the standards in section 8 of the act (63 P. S. § 42.8) will be considered as having passed this portion of the Board’s examination.

29-3

(301397) No. 351 Feb. 04
(b) Applicants who have passed the National Board will be permitted to take
the PM Lexis examination or an examination given by its current provider or
successor provided they meet the other requirements for examination imposed by
the act or by this chapter.

(c) The Board has adopted Nationally recognized examinations for both of
the examinations in subsections (a) and (b). Fees are established by the National
owners/providers of the examinations. Candidates for examination shall obtain
applications directly from the provider and pay the fee for the examination
directly to the provider.

Authority
The provisions of this § 29.12 amended under section 14(a) of the Podiatry Practice Act (63 P. S.
§ 42.14(a)).

Source
The provisions of this § 29.12 adopted June 8, 1979, effective June 9, 1979, 9 Pa.B. 1804;
appears at serial page (236302).

§ 29.13. Fees

(a) The schedule of fees charged by the Board is as follows:

<table>
<thead>
<tr>
<th>Fee Description</th>
<th>Fee</th>
</tr>
</thead>
<tbody>
<tr>
<td>Initial license</td>
<td>$30</td>
</tr>
<tr>
<td>Biennial renewal of license</td>
<td>$395</td>
</tr>
<tr>
<td>License by reciprocity</td>
<td>$95</td>
</tr>
<tr>
<td>Branch office certificate</td>
<td>$20</td>
</tr>
<tr>
<td>Application for approval of educational conference</td>
<td>$75</td>
</tr>
<tr>
<td>Certification of licensure or scores</td>
<td>$25</td>
</tr>
<tr>
<td>Verification of licensure</td>
<td>$15</td>
</tr>
<tr>
<td>Application for authorization to perform radiologic procedures</td>
<td>$25</td>
</tr>
<tr>
<td>Review of continuing education waiver or extension requests</td>
<td>$50</td>
</tr>
<tr>
<td>Review of reinstatement of license requests following inactive or expired status</td>
<td>$25</td>
</tr>
</tbody>
</table>

(b) Fees shall accompany applications and be made payable to the “Commonwealth of Pennsylvania” by personal check or money order.

Authority
The provisions of this § 29.13 issued under section 812.1(b) of The Administrative Code of 1929
(71 P. S. § 279.3a(b)); amended under sections 4, 9, 9.1, 14 and 15 of the Podiatry Practice Act (63
P. S. §§ 42.4, 42.9, 42.9a, 42.14 and 42.15); and section 812.1 of The Administrative Code of 1929
(71 P. S. § 279.3a).

Source
The provisions of this § 29.13 adopted June 8, 1979, effective June 9, 1979, 9 Pa.B. 1804;

(a) Engaging in the practice of podiatry in this Commonwealth while not maintaining a current registration constitutes a violation of section 12 of the act (63 P. S. § 42.12) and, therefore, under section 16 of the act (63 P. S. § 42.16) is grounds for the suspension or revocation of a license to practice podiatry in this Commonwealth.

(b) A podiatrist who does not desire to renew his registration shall, in writing, inform the Board that he does not intend to practice.

(c) Attendance at education conferences in compliance with section 9.1 of the act (63 P. S. § 42.9a) shall be verified by the licensee on his application for biennial registration.

Source

Cross References
This section cited in 49 Pa. Code § 43b.27 (relating to schedule of civil penalties—podiatrists).

§ 29.15. [Reserved].

Source

STANDARDS OF ETHICAL PRACTICE


The practitioner of podiatry shall conduct himself as a gentleman, and shall be a credit to the profession of which the practitioner is a member. The practitioner shall be temperate in all things, for the practice of podiatry requires the unremitting exercise of a clean and vigorous understanding, a steady hand and an accurate eye. These are essential to the welfare and even the life of a human being.

Source
§ 29.22. Gifts.
A podiatrist may not give, offer, solicit or accept a gift, gratuity, commission or bonus, directly or indirectly, in consideration for the receipt or making of a referral or recommendation of a patient for podiatric treatment.

Source

§ 29.23. Confidentiality.
The confidence and knowledge which podiatrists receive, through their professional attendance upon patients, shall be guarded with the most scrupulous care.

Source

Cross References
This section cited in 49 Pa. Code § 29.96 (relating to confidentiality—waived).

§ 29.24. Professional courtesy.
Whenever a podiatrist requests another podiatrist to attend his patients during his temporary absence from his practice, professional courtesy requires the acceptance of the appointment if consistent with other duties. The podiatrist acting under the appointment shall give the utmost consideration to the interests and reputation of the absent podiatrist. Patients, both old and new, shall be restored to the care of the absent podiatrist upon his return.

Source

§ 29.25. Obligations.
(a) A person who enters the profession, and who is thereby entitled to full professional fellowship, incurs obligations to observe strictly laws that are instituted for the government of the members of the profession, to honor the fraternity as a body and to exalt its standing and extend the bounds of its usefulness.

(b) A podiatrist should guard and protect the podiatry profession against those who are ethically unfit as professional associates. A member of the podiatry profession should expose corrupt or dishonest conduct to the Board.

(c) A podiatrist may not knowingly associate with or engage in the practice of podiatry with an unethical practitioner, or with a practitioner who is in violation of this chapter.
(a) It shall be misconduct for a licensed podiatrist to share a fee or enter into an agreement which calls for the splitting of fees with unlicensed individuals or entities.
(b) For the purposes of this section, fee splitting shall include payments for rent, clerical services and similar supportive services to unlicensed individuals or entities by podiatrists when the payments are based upon or related to the amount of fees generated by the podiatrists.

§ 29.27. Permitted business practices.
(a) A podiatrist may offer laboratory services to other health care practitioners, if the podiatrist’s laboratory is equipped, staffed and utilized in compliance with general professional standards.
(b) A podiatrist may practice podiatry alone or with one or more other podiatrists in the form of a professional corporation or a partnership in compliance with 15 Pa.C.S. §§ 2901—2907 and 8101—8365.
(c) A podiatrist may practice podiatry in the form of a professional corporation or a partnership with one or more chiropractors, physicians, optometrists, osteopathic physicians, dentists and psychologists, if the corporation or the partnership is also authorized by Chapters 5, 16, 23, 25, 33 and 41.
(d) A sole proprietorship, partnership or professional corporation engaged in the practice of podiatry may make use of a fictitious name under 15 Pa.C.S. § 2921 (relating to corporate name) and 54 Pa.C.S. §§ 301—332 (relating to the Fictitious Names Act).
(e) The Board will evaluate fictitious names to determine that they are not misleading or deceptive. The Board will disapprove a fictitious name if it is misleading or deceptive.

§ 29.31. Advertising.
(a) A podiatrist may advertise in any lawful medium.
(b) Advertising that is false, misleading or deceptive is prohibited.
(c) A podiatrist may indicate or list areas of podiatry which the podiatrist practices.

(d) A podiatrist who is certified by a specialty board approved by the Council on Podiatric Medical Education of the American Podiatric Medical Association may advertise that the podiatrist is so certified or specializes in the area of practice.

(e) A podiatrist who advertises that the podiatrist specializes in an area or is certified by a specialty board not approved by the Council on Podiatric Medical Education of the American Podiatric Medical Association shall include the following statement in the advertisement: “This certification (or area of specialization) is not sanctioned by the State Board of Podiatry.” This statement shall immediately follow the advertisement and shall be as prominent as the claim of specialization or certification.

(f) A podiatrist may advertise as a “podiatrist” or “foot specialist,” or “surgeon podiatrist,” or “surgeon podiatrist and foot specialist,” or advertise the practice as “foot ailments.” The use of the term “orthopedic,” whether as a statement of an area of practice or as part of a claim of specialization or certification shall be confined to “podiatric orthopedics.” The following are examples of permissible uses of the term “orthopedic”: “John Smith, D.P.M., Practice limited to podiatric orthopedics,” “Jane Smith, D.P.M., Certified by the American Board of Podiatric Orthopedics.” “John Doe, D.P.M., Specialist in Podiatric Orthopedics.” The following are examples of impermissible uses of the term “orthopedic”: “Jane Doe, D.P.M. Practice limited to orthopedics.” “John Smith, D.P.M., Orthopedic Specialist.”

(g) When a podiatrist succeeds another podiatrist who has retired, changed address or died, the succeeding podiatrist may retain the old listings or signs, or both, for 1 year. During this period, the successor may display the predecessor’s sign and carry the successor’s own telephone listing. After 1 year has elapsed, the successor may no longer carry the listing or display a sign which might imply to or be construed by the public that the former practitioner is still carrying on the practice at that location. The successor may continue indefinitely to list himself or display signs stating that he is the successor to the former practitioner, for example, “John Doe, D.S.C., successor to Richard Roe, D.S.C.” or similar wording.

(h) Advertising of a fee or method of payment is permissible if each specific service and part of service advertised is identified as to price. Advertising any portion of a potential treatment program as “free” is specifically prohibited as being inherently deceptive and misleading where receipt of the “free” service is conditioned upon the purchase of some other service, unless the advertisement fully discloses the terms and conditions for receiving the services.
(i) A podiatrist may not lend his name, professional position or public endorsement to the sale of a drug, appliance or product when the advertisement utilizing the name, position or endorsement is misleading, deceptive or fraudulent.

Source


§ 29.31a. [Reserved].

Source


§ 29.32. [Reserved].

Source


§ 29.33. [Reserved].

Source

The provisions of this § 29.33 adopted January 20, 1960; reserved August 3, 1984, effective August 4, 1984, 14 Pa.B. 2860. Immediately preceding text appears at serial pages (42064) and (30305).

§ 29.34. [Reserved].

Source


§ 29.35. [Reserved].

Source

§ 29.36. [Reserved].

Source


ADMINISTRATION AND PRESCRIPTION OF DRUGS

§ 29.41. Therapeutic drugs.

Drugs which may be administered and prescribed by a podiatrist are:

*Therapeutic Drugs*
- Analgesics and antipyretics
- Narcotic
- Non-narcotic
- Antibiotics
- Antifungal
- Antihistamines
  - Analgesic combinations
  - Corticoid combinations
- General
- Sympathomimetic drugs
- Anesthetics
- Anti-infectives and antibiotics
  - General
  - Local
- Anti-inflammatory
  - Analgesic compounds and steroids
  - Glucocorticoids
- Antinauseants
- Dermatological
  - Antifungal
  - Antiseptic topical
  - Bath use
  - Calamine, zinc oxide preparations
  - Corticoids
    - General
  - Poison ivy and antihistamine preparations
  - Scabicides and Pediculosis
  - Vitamin preparations
- Enzymes
- Fungal agents
- Hemorheologic agents
- Hypnotic drugs and sedatives

29-10
Barbiturates (pre-op and post-op)
Nonbarbiturates
Muscle relaxants
Peripheral vasodilators
Vitamins

Source

LICENSURE APPLICATIONS

§ 29.51. Applicants.
On applications for licensure or the biennial renewal of a license, the applicant shall answer the following three questions:
(1) Using as a base the number of patients served in an annual period, what percentage of your practice is in Pennsylvania?
   0% _______ 1—20% _______ 21% or more _______.
   (If the answer to question (1) is 0%, or if practicing only as a Federal employee, (2) and (3) need not be answered.)
(2) Name of professional liability insurance carrier:
(3) Policy No: _____________________________

Authority
The provisions of this § 29.51 amended under section 15 of the Podiatry Practice Act (63 P. S. § 42.15); and the Medical Care Availability and Reduction of Error Act (40 P. S. §§ 1303.101—1303.910).

Source

Cross References
This section cited in 49 Pa. Code § 29.53 (relating to original license); and 49 Pa. Code § 29.55 (relating to volunteer license).

§ 29.52. Requirements for applicants.
(a) Applicants for licensure or licensees applying for biennial renewal, who practice in this Commonwealth, shall furnish satisfactory proof to the Board that they are complying with the Medical Care Availability and Reduction of Error (MCARE) Act (40 P. S. §§ 1303.101—1303.910), in that the applicant or licensee, if required by the act and the rules and regulations pertaining thereto, is
maintaining the required amount of professional liability insurance or an approved self-insurance plan, and has paid the required fees and surcharges.

(b) Licensees practicing solely as Federal employees are not required to participate in the professional liability insurance program, nor are they required to comply with the MCARE Act.

(c) Licensees practicing podiatry in this Commonwealth shall carry at least the minimum amount of professional liability insurance or an approved self-insurance plan as set forth in the MCARE Act. The licensee shall carry liability insurance or an approved self-insurance plan to cover all professional services performed by the licensee. Licensees who do not practice in this Commonwealth are not required to comply with the MCARE Act.

Authority

The provisions of this § 29.52 amended under section 15 of the Podiatry Practice Act (63 P. S. § 42.15); and the Medical Care Availability and Reduction of Error Act (40 P. S. §§ 1303.101—1303.910).

Source


Cross References

This section cited in 49 Pa. Code § 29.53 (relating to original license).

§ 29.53. Original license.

A podiatrist applying for an original license to practice podiatry shall, within 60 days after receipt of the podiatrist’s original license, furnish the Board with the information required in § 29.51 (relating to applicants), and proof of professional liability insurance as required by § 29.52(a) (relating to requirements for applicants).

Authority

The provisions of this § 29.53 amended under section 15 of the Podiatry Practice Act (63 P. S. § 42.15); and the Medical Care Availability and Reduction of Error Act (40 P. S. §§ 1303.101—1303.910).

Source


Cross References

This section cited in 49 Pa. Code § 29.55 (relating to volunteer license).
§ 29.54. Penalty.

Failure to comply with the Medical Care Availability and Reduction of Error (MCARE) Act (40 P. S. §§ 1303.101—1303.910), the regulations issued thereunder, and this subchapter will result in a suspension or revocation of the licensee’s license after a formal hearing before the Board.

Authority

The provisions of this § 29.54 amended under section 15 of the Podiatry Practice Act (63 P. S. § 42.15); and the Medical Care Availability and Reduction of Error Act (40 P. S. § 1303.101—1303.910).

Source

The provisions of this § 29.54 adopted December 3, 1976, effective December 4, 1976, 6 Pa.B. 2985; amended June 2, 2006, effective June 3, 2006, 36 Pa.B. 2675. Immediately preceding text appears at serial pages (236310) and (301401).

Cross References

This section cited in 49 Pa. Code § 29.55 (relating to volunteer license).

§ 29.55. Volunteer license.

(a) Purpose and definitions.

(1) The following subsections implement the Volunteer Health Services Act (35 P. S. §§ 449.41—449.50) and provide for the issuance of a volunteer license to a qualified individual who retires from active practice and seeks to provide professional services as a volunteer. A volunteer license authorizes the holder to practice only in an organized community-based clinic without remuneration.

(2) The following words and terms, when used in this section, have the following meanings:

Approved clinic—An organized community-based clinic offering primary health care services to individuals and families who cannot pay for their care, to Medical Assistance clients or to residents of medically underserved areas or health professionals shortage areas. The term may include a State health center, nonprofit community-based clinic and Federally qualified health center, as designated by Federal rulemaking or as approved by the Department of Health or the Department of Public Welfare.

Unrestricted license—A license which is not restricted or limited by order of the Board under its disciplinary power.

(b) Issuance of license. A volunteer license may be issued to a licensee of the Board who documents to the satisfaction of the Board that the applicant will practice without personal remuneration in approved clinics and meets one of the following conditions:

29-12.1
(1) Holds a currently renewed, active, unrestricted license as a podiatrist in this Commonwealth and retires from active practice at the time the applicant applies for a volunteer license.

(2) Retires from active practice in this Commonwealth in possession of an unrestricted license which was allowed to lapse by not renewing it. A retired licensee shall meet any requirements of the act or the regulations pertaining to continued education or continued competency to be eligible for renewal.

(c) Applications. An applicant for a volunteer license shall complete an application obtained from the Board. In addition to providing information requested by the Board, the applicant shall provide:

(1) An executed verification on forms provided by the Board certifying that the applicant intends to practice exclusively as follows:

   (i) Without personal remuneration for professional services.

   (ii) In an approved clinic.

(2) A letter signed by the director or chief operating officer of an approved clinic that the applicant has been authorized to provide volunteer services in the named clinic by the governing body or responsible officer of the clinic.

(d) Validity of a license. A volunteer license shall be valid for the biennial period for which it is issued, subject to biennial renewal. During each biennial renewal period, the volunteer license holder shall notify the Board of any change in clinic or volunteer status within 30 days of the date of a change, or at the time of renewal, whichever occurs first.

(e) Renewal of license. A volunteer license shall be renewed biennially on forms provided by the Board.

   (1) As a condition of biennial renewal, the applicant shall satisfy the same continuing education requirements as the holder of an active, unrestricted license.

   (2) The applicant shall be exempt from § 29.13 (relating to fees) pertaining to the biennial renewal fee and shall be exempt from the requirements with regard to maintenance of liability insurance coverage under section 701 of the Health Care Services Malpractice Act (40 P. S. § 1301-701) and §§ 29.51—29.54.

(f) Return to active practice. A volunteer license holder who desires to return to active practice shall notify the Board and apply for biennial registration on forms provided by the Board in accordance with §§ 29.51 and 29.52 (relating to applicants; and requirements for applicants).

(g) Disciplinary provisions. A volunteer license holder shall be subject to the disciplinary provisions of the act and this chapter. Failure of the licensee to comply with the Volunteer Health Services Act (35 P. S. §§ 449.41—449.50) or this chapter may also constitute grounds for disciplinary action.
CONTINUING EDUCATION

§ 29.60. Definitions.

The following words and terms, when used in this chapter, have the following meanings, unless the context clearly indicates otherwise:

Biennium—The period from January 1 of an odd-numbered year to December 31 of the next even-numbered year.

Certification—A statement signed by the licensee certifying that continuing education requirements have been met along with information and documentation relative to the course.

Clock hour—Sixty minutes of instruction, exclusive of coffee breaks, lunches, visits to exhibits and the like.

Provider—An agency, organization, institution, association or center approved by the Board to offer an organized course or program.

Authority

The provisions of this § 29.60 issued under sections 9, 9.1 and 15 of the Podiatry Practice Act (63 P. S. §§ 42.9, 42.9a and 42.15).

Source

The provisions of this § 29.60 adopted December 5, 2003, effective December 6, 2003, 33 Pa.B. 5916.

§ 29.61. Requirements for biennial renewal and eligibility to conduct educational conferences.

(a) Effective with the renewal of licensure for the 2011-2012 biennium, a licensee applying for biennial renewal of a license shall have completed 50 clock hours of continuing education in approved courses and programs during the preceding biennium. At least 30 of the clock hours must be in courses and programs in podiatry that are approved by the Board or the Council on Podiatric Medical Education (CPME). The remaining clock hours must be either in courses and programs in podiatry that are approved by the Board or the CPME or in courses and programs in medical subjects that are approved by the American Medical Association or the American Osteopathic Association. A maximum of 10 clock hours may be in approved courses and programs that involve the use of the Internet or the reading of professional journals or magazine articles. Continuing edu-
Education credit will not be awarded for clock hours in office management or marketing the practice. Excess clock hours may not be carried over to the next biennium. A licensee is responsible for ensuring that a particular course or program is approved for continuing education credit prior to participating in the course or program.

(b) Providers approved by the Board are eligible to conduct educational conferences.

(c) Applicants for license renewal shall provide, on the renewal application, a signed statement certifying that the continuing education requirements have been met and information to document their certification, including the following:

(1) The date attended.
(2) The clock hours claimed.
(3) The title of the course or program and description of content.
(4) The provider which sponsored the course or program.
(5) The location of the course or program.

(d) The licensee shall retain attendance certificates to document completion of the prescribed number of clock hours for 5 years following the completion of each course, which shall be produced upon demand by the Board or its auditing agents.

Authority

The provisions of this § 29.61 issued under sections 9, 9.1 and 15 (63 P. S. §§ 42.9, 42.9a and 42.15).

Source


Cross References

This section cited in 49 Pa. Code § 29.69 (relating to continuing education requirement for biennial renewal of inactive and lapsed licenses); and 49 Pa. Code § 43b.27 (relating to schedule of civil penalties—podiatrists).

§ 29.62. Length of time of educational conferences.

(a) Educational conferences shall offer at least 1 hour of instruction.

(b) Educational conferences will be approved for continuing education credit at the rate of one credit per clock hour of instruction, exclusive of coffee breaks, lunches, visits to exhibits and the like.

Authority

The provisions of this § 29.62 amended under sections 9, 9.1 and 15 of the Podiatry Practice Act (63 P. S. §§ 42.9, 42.9a and 42.15).
§ 29.63. Curriculum of educational conferences.

(a) Basic subjects for educational conferences may include: anatomy, physiology, bacteriology, mycology, pharmacy, chemistry, X-ray, surgery, preoperative care, postoperative care, biomechanics, pathology, dermatology, and law and podiatry.

(b) In addition to the subjects listed in subsection (a), the Board may approve other subjects which it will determine appropriate for a conference. These subjects may be presented to the Board by the institute or organization sponsoring the educational conference.

Authority

The provisions of this § 29.63 amended under sections 9, 9.1 and 15 of the Podiatry Act (63 P. S. §§ 42.9, 42.9a and 42.15).

Source


§ 29.63a. [Reserved].

Authority

The provisions of this § 29.63a issued under sections 9, 9.1 and 15 of the Podiatry Practice Act (63 P. S. §§ 42.9, 42.9a and 42.15); reserved under sections 9.1 and 15 of the Podiatry Practice Act (63 P. S. §§ 42.9a and 42.15).

Source


§ 29.64. Applications for approval of educational conferences.

The Board may approve other continuing education courses or programs for credit so long as the applicant submits an application furnished by the Board for program approval in compliance with the following:

(1) Course applications shall be submitted to the Board for approval at least 60 days prior to the scheduled date of the proposed educational conference.
(2) The application shall include a copy of the full program brochure or the course syllabus, or both. Further information may be required and shall be submitted in a timely fashion.

(3) The Board shall be notified immediately of material changes in any approved conference. Board approval can be withdrawn should changes in proposed conferences not adhere to the Board’s requirements.

Authority
The provisions of this § 29.64 amended under sections 9, 9.1 and 15 of the Podiatry Practice Act (63 P. S. §§ 42.9, 42.9a and 42.15).

Source

§ 29.65. Compilation of official attendance list.
(a) The group, organization, or institution sponsoring an educational conference shall be responsible for designating an authorized representative to authenticate attendance and compile an official attendance list of Pennsylvania licensees in attendance at their conference.
(b) It shall be the responsibility of the authorized representative to submit an official attendance list to the Board Office within 30 days following the final day of the conference.

Source

§ 29.66. Instructors at education conferences.
(a) Members of the faculties of the approved schools of podiatry shall be deemed qualified to act as instructors at educational conferences in the field in which they give their instruction in the school.
(b) Podiatrists who are licensed to practice in this State or another state, but who are not members of faculties of approved schools of podiatry may be deemed qualified to act as lecturers or instructors by virtue of professional activity and achievement in a particular field. Doctors can be recognized by the Board as qualified to speak on subjects of pertinent value to the profession.
(c) The Board may approve other lecturers or instructors who are not licensed to practice podiatry, provided the Board determines their qualifications to speak upon a subject which will be of value to the profession.

29-14.2
§ 29.67. Approval or disapproval of educational conferences.

(a) The Board will notify an applicant for course approval as to the approval or disapproval of the application within 30 days of action taken by the Board at the next scheduled Board meeting.

(b) A notice by the Board that it has failed to approve an application for an educational conference shall include a statement setting forth its reasons for disapproval.

(c) An applicant whose application has been disapproved by the Board may submit a new application within 10 days after the receipt of the disapproval of application by the Board. Applications shall document the manner in which the proposed conference has been altered to comply with the Board’s requirements. The applicant will then be notified, as soon as it is within the Board’s capability, of the action taken on the new application.

Authority

The provisions of this § 29.67 amended under sections 9, 9.1 and 15 of the Podiatry Practice Act (63 P.S. §§ 42.9, 42.9a and 42.15).
§ 29.68. Continuing education exemptions.

(a) Continuing education credits are not required for the years in which a licensed and currently registered podiatrist is in active military service or engaged in an American Podiatry Association approved Podiatric Residency Program.

(b) The Board may waive all or a portion of the continuing education requirement for biennial renewal upon request of a licensee for serious illness or other demonstrated hardship. The request shall be made in writing, contain supporting documentation, and shall include a description of circumstances sufficient to show why compliance is impossible. A waiver request will be evaluated by the Board on a case-by-case basis. The Board will send written notification of its approval or denial of a waiver request.

(c) A fee shall be assessed for review of waiver or extension requests in accordance with § 29.13 (relating to fees).

Authority

The provisions of this § 29.68 amended under sections 9, 9.1 and 15 of the Podiatry Practice Act (63 P. S. §§ 42.9, 42.9a and 42.15).

Source


§ 29.69. Continuing education requirement for biennial renewal of inactive and lapsed licenses.

(a) A licensee seeking to reinstate an inactive or lapsed license shall show proof of compliance with the continuing education requirement for the preceding biennium as required by § 29.61 (relating to requirements for biennial renewal and eligibility to conduct educational conferences).

(b) A fee shall be assessed for review of reinstatement of license requests following inactive or expired status in accordance with § 29.13 (relating to fees).

Authority

The provisions of this § 29.69 issued under sections 9, 9.1 and 15 of the Podiatry Practice Act (63 P. S. §§ 42.9, 42.9a and 42.15).

Source

The provisions of this § 29.69 adopted December 5, 2003, effective December 6, 2003, 33 Pa.B. 5916.

(301407) No. 351 Feb. 04
§ 29.69a. Disciplinary action authorized.
A licensed podiatrist who submits a false report or fails to complete the required number of continuing education credits may be subject to disciplinary action.

Authority
The provisions of this § 29.69a issued under sections 9, 9.1 and 15 of the Podiatry Practice Act (63 P. S. §§ 42.9, 42.9a and 42.15).

Source
The provisions of this § 29.69a adopted December 5, 2003, effective December 6, 2003, 33 Pa.B. 5916.

RECIPROCAL LICENSURE

§ 29.71. Application.
Applicants for reciprocal licensure shall provide the Board with the following verified information:

1. Name.
2. Address.
3. Place and date of birth.
4. States and territories of the United States in which applicant is or has been licensed to practice podiatry, including dates of licensure.
5. States and territories of the United States in which applicant has been denied licensure including dates and reason for denial.
6. Disciplinary actions against applicant’s podiatry license in a State or territory of the United States.
7. Past criminal convictions.
8. A statement that applicant intends to become a resident of this Commonwealth, including proposed address and date of intended residence.

Authority
The provisions of this § 29.71 amended under section 14(a), (b) and (d) of the Podiatry Practice Act (63 P. S. § 42.14(a), (b) and (d)).

Source
The provisions of this § 29.71 adopted June 8, 1979, effective June 9, 1979, 9 Pa.B. 1804; amended February 17, 1989, effective upon publication and applies retroactively to December 31, 1988, 19 Pa.B. 639. Immediately preceding text appears at serial page (121483).

Cross References
This section cited in 49 Pa. Code § 29.74 (relating to falsification of application; failure to become a resident).
§ 29.72. Finding by the Board: equivalent standards for licensure.

Upon a finding by the Board that the applicant was originally licensed in a state or territory of the United States which has standards for licensure that are substantially equivalent to that of the Commonwealth and which extends similar privileges to podiatrists licensed originally by the Commonwealth, the applicant shall be granted a license to practice podiatry in this Commonwealth.

Source
The provisions of this § 29.72 adopted June 8, 1979, effective June 9, 1979, 9 Pa.B. 1804.

Cross References
This section cited in 49 Pa. Code § 29.73 (relating to residency required); and 49 Pa. Code § 29.74 (relating to falsification of application; failure to become a resident).

§ 29.73. Residency required.

Applicants granted licensure under § 29.72 (relating to finding by the Board: equivalent standards for licensure) shall become residents of this Commonwealth within 6 months of licensure. For the purpose of this chapter, residency means both living and practicing in this Commonwealth.

Source

§ 29.74. Falsification of application; failure to become a resident.

The Board will revoke licenses granted under § 29.72 (relating to finding by the Board: equivalent standards for licensure) if it determines that the information required by § 29.71 (relating to application) is false or that the applicant did not become a resident of this Commonwealth immediately after licensure. For purposes of this section, a finding that an applicant has failed to establish residence in this Commonwealth within 6 months of licensure is sufficient proof upon which to base a decision that the applicant violated this section.

Source
The provisions of this § 29.74 adopted June 8, 1979, effective June 9, 1979, 9 Pa.B. 1804.
PERFORMANCE OF RADIOLOGICAL PROCEDURES BY AUXILIARY PERSONNEL

§ 29.81. Definitions.
The following words and terms, when used in this chapter, have the following meanings, unless the context clearly indicates otherwise:

Auxiliary personnel—A person other than a podiatrist, medical doctor, osteopathic doctor, dentist or chiropractor.

Direct supervision—Directly controlling the performance of a procedure by authorizing performance of that procedure only under the specific instructions of a podiatrist, and monitoring performance of the procedure to ensure compliance with the instructions.

Ionizing radiation—Gamma rays and X-rays; and alpha and beta particles, high-speed electrons, neutrons, protons and other nuclear particles. The term does not include ultrasound, sound or radio waves or visible, infrared or ultraviolet light.

Premises of a podiatrist—A location at which a podiatrist practices podiatric medicine, other than a health care facility regulated by the Department of Health, the Department of Public Welfare or the Federal government.

Radiologic procedure—A medical diagnostic or therapeutic procedure that utilizes ionizing radiation.

Authority
The provisions of this § 29.81 issued under section 21.2 of the Podiatry Practice Act (63 P. S. § 42.21c).

Source

§ 29.82. Auxiliary personnel performing radiologic procedures.
(a) A person may, within the practice of podiatric medicine, perform radiologic procedures on the premises of a podiatrist and under the direct supervision of the podiatrist, if one of the following applies:

(1) The person has passed an examination in radiology conducted by the American Society of Podiatric Medical Assistants or the American Registry of Radiologic Technologists. The examination shall at least cover the use of ionizing radiation, for diagnostic or therapeutic purposes, in areas of the human body within the scope of the practice of podiatric medicine.

(2) The person has passed an examination approved by the State Boards of Medicine, Osteopathic Medicine or Chiropractic to apply ionizing radiation to human beings for diagnostic or therapeutic purposes.

(3) The person has passed an examination approved and administered by the Board.
(b) The podiatrist is not required to personally observe the performance of radiologic procedures, but shall be on the premises at the time of the performance.

Authority
The provisions of this § 29.82 issued under section 21.2 of the Podiatry Practice Act (63 P. S. § 42.21c).

Source

§ 29.83. Examinations.
(a) An examination in radiology shall cover the subjects of anatomy, physiology and physics for technicians and radiographers, with emphasis being placed on the scope of the practice of podiatric medicine.
(b) Applications for examination shall be completed on forms furnished by the Board and submitted at least 60 days prior to the scheduled date of the examination to the address indicated on the application materials with the fee as required by the examination administrator.

Authority
The provisions of this § 29.83 issued under section 21.2 of the Podiatry Practice Act (63 P. S. § 42.21c); and amended under section 812.1 of The Administrative Code of 1929 (71 P. S. § 279.3a); and sections 14(a) and 21.2 of the Podiatry Practice Act (63 P. S. §§ 42.14(a) and 42.21c).

Source

§ 29.84. Locations and dates of examinations.
The Board will publish annually a list of examination locations and dates.

Authority
The provisions of this § 29.84 issued under section 21.2 of the Podiatry Practice Act (63 P. S. § 42.21c).

Source
§ 29.91. Definitions relating to child abuse reporting requirements.

The following words and terms, when used in this section and §§ 29.92—29.97, have the following meanings, unless the context clearly indicates otherwise:

Child abuse—A term meaning any of the following:

(i) A recent act or failure to act by a perpetrator which causes nonaccidental serious physical injury to a child under 18 years of age.

(ii) An act or failure to act by a perpetrator which causes nonaccidental serious mental injury to or sexual abuse or sexual exploitation of a child under 18 years of age.

(iii) A recent act, failure to act or series of acts or failures to act by a perpetrator which creates an imminent risk of serious physical injury to or sexual abuse or sexual exploitation of a child under 18 years of age.

(iv) Serious physical neglect by a perpetrator constituting prolonged or repeated lack of supervision or the failure to provide the essentials of life, including adequate medical care, which endangers a child’s life or development or impairs the child’s functioning.

ChildLine—An organizational unit of the Department of Public Welfare which operates a 24-hour a day Statewide toll free telephone system for receiving reports of suspected child abuse, referring reports for investigation and maintaining the reports in the appropriate file.

Individual residing in the same home as the child—An individual who is 14 years of age or older and who resides in the same home as the child.

Perpetrator—A person who has committed child abuse and is a parent of the child, a person responsible for the welfare of a child, an individual residing in the same home as a child or a paramour of a child’s parent.

Person responsible for the child’s welfare—A person who provides permanent or temporary care, supervision, mental health diagnosis or treatment, training or control of a child in lieu of parental care, supervision and control. The term does not include a person who is employed by or provides services or programs in a public or private school, intermediate unit or area vocational-technical school.

Recent acts or omissions—Acts or omissions committed within 2 years of the date of the report to the Department of Public Welfare or county agency.

Serious mental injury—A psychological condition, as diagnosed by a physician or licensed psychologist, including the refusal of appropriate treatment, that does one or more of the following:

(i) Renders a child chronically and severely anxious, agitated, depressed, socially withdrawn, psychotic or in reasonable fear that the child’s life or safety is threatened.
(ii) Seriously interferes with a child’s ability to accomplish age-appropriate developmental and social tasks.

**Serious physical injury**—An injury that causes a child severe pain or significantly impairs a child’s physical functioning, either temporarily or permanently.

**Sexual abuse or exploitation**—The employment, use, persuasion, inducement, enticement or coercion of a child to engage in or assist another person to engage in sexually explicit conduct or a simulation of sexually explicit conduct for the purpose of producing a visual depiction, including photographing, videotaping, computer depicting or filming, of sexually explicit conduct or the rape, sexual assault, involuntary deviate sexual intercourse, aggravated indecent assault, molestation, incest, indecent exposure, prostitution, statutory sexual assault or other form of sexual exploitation of children.

**Authority**

The provisions of this § 29.91 issued under the Child Protective Services Law, 23 Pa.C.S. § 6383(b)(2); and section 15 of the Podiatry Practice Act (63 P. S. § 42.15).

**Source**

The provisions of this § 29.91 adopted November 8, 1996, effective November 9, 1996, 26 Pa.B. 5405.

§ 29.92. Suspected child abuse—mandated reporting requirements.

(a) **General rule.** Under 23 Pa.C.S. § 6311 (relating to persons required to report suspected child abuse), podiatrists who, in the course of their employment, occupation or practice of their profession, come into contact with children shall report or cause a report to be made to the Department of Public Welfare when they have reasonable cause to suspect on the basis of their professional or other training or experience, that a child coming before them in their professional or official capacity is a victim of child abuse.

(b) **Staff members of public or private agencies, institutions and facilities.** Podiatrists who are staff members of a medical or other public or private institution, school, facility or agency, and who, in the course of their employment, occupation or practice of their profession, come into contact with children shall immediately notify the person in charge of the institution, school, facility or agency or the designated agent of the person in charge when they have reasonable cause to suspect on the basis of their professional or other training or experience, that a child coming before them in their professional or official capacity is a victim of child abuse. Upon notification by the podiatrist, the person in charge or the designated agent shall assume the responsibility and have the legal obligation to report or cause a report to be made in accordance with subsections (a), (c) and (d).

(c) **Reporting procedure.** Reports of suspected child abuse shall be made by telephone and by written report.
Oral reports. Oral reports of suspected child abuse shall be made immediately by telephone to ChildLine, (800) 932-0313.

Written reports. Written reports shall be made within 48 hours after the oral report is made by telephone. Written reports shall be made on forms available from a county children and youth social service agency.

(d) Written reports. Written reports shall be made in the manner and on forms prescribed by the Department of Public Welfare. The following information shall be included in the written reports, if available:

(1) The names and addresses of the child and the parents or other person responsible for the care of the child, if known.
(2) Where the suspected abuse occurred.
(3) The age and sex of the subjects of the report.
(4) The nature and extent of the suspected child abuse including any evidence of prior abuse to the child or siblings of the child.
(5) The name and relationship of the persons responsible for causing the suspected abuse, if known, and any evidence of prior abuse by those persons.
(6) Family composition.
(7) The source of the report.
(8) The person making the report and where that person can be reached.
(9) The actions taken by the reporting source, including the taking of photographs and X-rays, removal or keeping of the child or notifying the medical examiner or coroner.
(10) Other information which the Department of Public Welfare may require by regulation.

Authority
The provisions of this § 29.92 issued under the Child Protective Services Law, 23 Pa.C.S. § 6383(b)(2); and section 15 of the Podiatry Practice Act (63 P. S. § 42.15).

Source

Cross References
This section cited in 49 Pa. Code § 29.91 (relating to definitions relating to child abuse reporting requirements); 49 Pa. Code § 29.96 (relating to confidentiality—waived); and 49 Pa. Code § 29.97 (relating to noncompliance).

§ 29.93. Photographs, medical tests and X-rays of child subject to report.

A podiatrist may take or cause to be taken photographs of the child who is subject to a report and, if clinically indicated, cause to be performed a radiological examination and other medical tests on the child. Medical summaries or reports of the photographs, X-rays and relevant medical tests taken shall be sent to the county children and youth social service agency at the time the written
report is sent or as soon thereafter as possible. The county children and youth social service agency shall have access to actual photographs or duplicates and X-rays and may obtain them or duplicates of them upon request.

Authority
The provisions of this § 29.93 issued under the Child Protective Services Law, 23 Pa.C.S. § 6383(b)(2); and section 15 of the Podiatry Practice Act (63 P. S. § 42.15).

Source

Cross References
This section cited in 49 Pa. Code § 29.91 (relating to definitions relating to child abuse reporting requirements); 49 Pa. Code § 29.96 (relating to confidentiality—waived); and 49 Pa. Code § 29.97 (relating to noncompliance).

§ 29.94. Suspected death as a result of child abuse—mandated reporting requirement.
A podiatrist who has reasonable cause to suspect that a child died as a result of child abuse shall report that suspicion to the coroner of the county where death occurred or, in the case where the child is transported to another county for medical treatment, to the coroner of the county where the injuries were sustained.

Authority
The provisions of this § 29.94 issued under the Child Protective Services Law, 23 Pa.C.S. § 6383(b)(2); and section 15 of the Podiatry Practice Act (63 P. S. § 42.15).

Source
The provisions of this § 29.94 adopted November 8, 1996, effective November 9, 1996, 26 Pa.B. 5405.

Cross References
This section cited in 49 Pa. Code § 29.91 (relating to definitions relating to child abuse reporting requirements); 49 Pa. Code § 29.96 (relating to confidentiality—waived); and 49 Pa. Code § 29.97 (relating to noncompliance).

§ 29.95. Immunity from liability.
Under 23 Pa.C.S. § 6318 (relating to immunity from liability) a podiatrist who participates in good faith in the making of a report, cooperating with an investigation, testifying in a proceeding arising out of an instance of suspected child abuse or the taking of photographs shall have immunity from civil and criminal liability that might result by reason of the podiatrist’s actions. For the purpose of a civil or criminal proceeding, the good faith of the podiatrist shall be presumed. The Board will uphold the same good faith presumption in any disciplinary proceeding that might result by reason of a podiatrist’s actions in participating in
good faith in the making of a report, cooperating with an investigation, testifying in
a proceeding arising out of an instance of suspected child abuse or the taking
of photographs.

Authority
The provisions of this § 29.95 issued under the Child Protective Services Law, 23 Pa.C.S.
§ 6383(b)(2); and section 15 of the Podiatry Practice Act (63 P. S. § 42.15).

Source
The provisions of this § 29.95 adopted November 8, 1996, effective November 9, 1996, 26 Pa.B.
5405.

Cross References
This section cited in 49 Pa. Code § 29.91 (relating to definitions relating to child abuse reporting
requirements).

§ 29.96. Confidentiality—waived.
To protect children from abuse, the reporting requirements of §§ 29.92—29.94
(relating to suspected child abuse—mandated reporting requirements; photo-
graphs, medical tests and X-rays of child subject to report; and suspected death
as a result of child abuse—mandated reporting requirement) take precedence over
the provisions of confidentiality in § 29.23 (relating to confidentiality) and any
other ethical principle or professional standard that might otherwise apply to
podiatrists.

Authority
The provisions of this § 29.96 issued under the Child Protective Services Law, 23 Pa.C.S.
§ 6383(b)(2); and section 15 of the Podiatry Practice Act (63 P. S. § 42.15).

Source
The provisions of this § 29.96 adopted November 8, 1996, effective November 9, 1996, 26 Pa.B.
5405.

Cross References
This section cited in 49 Pa. Code § 29.91 (relating to definitions relating to child abuse reporting
requirements).

§ 29.97. Noncompliance.
(a) Disciplinary action. A podiatrist who willfully fails to comply with the
reporting requirements in §§ 29.92—29.94 (relating to suspected child abuse—
mandated reporting requirements; photographs, medical tests and X-rays of child
subject to report; and suspected death as a result of child abuse—mandated
reporting requirement) will be subject to disciplinary action under section 16 of
the act (63 P. S. § 42.16).
(b) Criminal penalties. Under 23 Pa.C.S. § 6319 (relating to penalties for
failure to report), a podiatrist who is required to report a case of suspected child

(223015) No. 266 Jan. 97
abuse who willfully fails to do so commits a summary offense for the first violation and a misdemeanor of the third degree for a second or subsequent violation.

Authority
The provisions of this § 29.97 issued under the Child Protective Services Law, 23 Pa.C.S. § 6383(b)(2); and section 15 of the Podiatry Practice Act (63 P. S. § 42.15).

Source

Cross References
This section cited in 49 Pa. Code § 29.91 (relating to definitions relating to child abuse reporting requirements).